Subcommittee on Criminal Justice, Drug Policy & Human Resources Hearing entitled "RU-486 – Demonstrating a Low Standard for Women's Health?" May17, 2006

### **Testimony of Monty L. Patterson**

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#### Introduction

I owe and dedicate my presence here to those who have no voice, particularly to my daughter, Holly, who died at 18, and the other women who have died or have been seriously hurt by taking the RU-486 medical abortion drug regimen as a solution to an unplanned pregnancy.

I am here to testify about my personal experience as the father of a victim of this drug and my consequent knowledge, experiences, and views pertaining to RU-486, the drug. I want to be clear that my views and testimony should be divorced from any debate about abortion. I feel we must examine the dangers associated with RU-486 for early medical pregnancy termination that are separate and apart from any particular view about a woman's right to access and choice.

## **Personal Experience**

Twelve days after Holly's 18<sup>th</sup> birthday, on September 10, 2003, she walked into a Planned Parenthood Clinic, to be administered a RU-486 medical abortion regimen. By the fourth day she was admitted to the emergency room of a local hospital complaining of bleeding, cramping, constipation, and pain. Holly was examined, given painkillers, and then sent home. Seven days after taking RU-486, Holly returned to the same emergency room hospital, complaining of weakness, vomiting, and abdominal pain. Hours later, I was called to the hospital, where I found her surrounded by doctors and nurses, barely conscious and struggling to breathe. Holly was so weak she could barely hold on to my hand. Feeling utter disbelief and desperation, I watched Holly succumb to a massive bacterial infection, as a result of a drug-induced abortion with RU-486.

#### <u>Issues</u>

With the support of my family and friends, I have spent thousands of hours researching medical and scientific journals, talking to doctors, legislators, state and federal agencies to learn about the drug RU-486, otherwise known as mifepristone.

I believe that RU-486 is the substantial contributing factor responsible for Holly's death. Currently, there have been 8 deaths reported by the FDA linked with RU-486. Furthermore, there are over 900 reported serious health consequences associated with the drug.

#### **FDA & White House**

One year after Holly's death, I met with FDA and White House officials in September 2004, to discuss concerns over the drug's safety and health issues. Two months later the FDA announced additional black box warnings highlighting serious infections and death.

#### **CDC/FDA/NIH Conference**

On May 11, 2006 I attended the CDC/FDA/NIH scientific conference in Atlanta whose main purpose was to discuss the safety of the drug regimen RU-486 to terminate early pregnancies. I presented a compilation of nearly 400 medical and scientific publications as a result of my 2 ½ years of extensive research. It is my hope this work will help to facilitate the understanding and causal relationship of RU-486 and medical abortion infections. Medical experts, Dr. Esther Sternberg, Dr. James McGregor, and Dr.

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Ralph Miech presented their concurring studies that RU-486 has serious and lethal medical implications as evidenced through animal models.

# FDA Responsibility

The FDA is responsible for protecting public health and therefore, must reconsider the use of RU-486 in early medical pregnancy terminations. It should explore active epidemiology and study animal models that show the alteration of the immune response by its interaction with RU-486 as it relates to serious and lethal infections. The FDA needs to provide the medical community reliable means and methods to recognize cases of serious adverse events associated with RU-486. Finally, the FDA needs to implement a confident reporting apparatus of these events so they can accurately evaluate the safety and health consequences with the use of the drug.

Patients, families and their physicians are entitled to have all the information necessary to make informed choices. The safety, health, and welfare of women considering medical abortion with RU-486 is paramount and should not be jeopardized with a drug that can seriously cause them harm or death. Women have paid the ultimate price with their health and their lives. How many must die needlessly before this drug is removed from the market?

## **Conclusion**

Women have been and are still relying upon what they think is truthful information concerning the limited risks involved with a medical abortion. Yet, does the average patient, a teenager, like Holly, understand she may be risking her life taking RU-486 when she's repeatedly exposed to statements like: "It's what women have wanted for years: Its the first FDA approved pill providing women with a safe and effective non-surgical option for ending early pregnancy".

There are no quick fixes or magical pills to make an unplanned pregnancy go away. My family, friends and community were deeply saddened and are forever marred by Holly's preventable and tragic death. It is my vibrant memory of Holly and her premature death that have inspired me to make the public aware of the serious and lethal effects of the RU-486 regimen. Not a day goes by that I do not recall her brilliant blue eyes, engaging smile, laughter, and sheer gentle beauty.

Holly's personal drive and unwavering determination continue to inspire me and give me strength to pursue these critical issues in her name. It is a natural instinct to protect our loved ones and speak for those who can not speak for themselves.